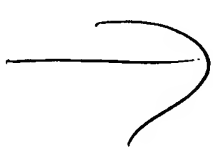


10/532641
JC20 Rec'd PCT/PTO 25 APR 2005

Application Data Sheet

Application Information


Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks::
Number of Copies of CDs::
Sequence Submission?:: None
Computer Readable Form (CRF):: No
Number of copies of CRF:: 0
Title:: MULTIBEAM ANTENNA WITH PHOTONIC
BANDGAP MATERIAL
Attorney Docket Number:: 0512-1274
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 7
Small Entity?:: No
Latin Name::
Variety Denomination Name::
Petition Included?:: No
Petition Type::
Licensed US Gov't Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Appl.?:: No



Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: MARC
Middle Name::
Family Name:: THEVENOT
Name Suffix::
City of Residence:: PEYRILHAC
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: PLACE DE LA MAIRIE
City of Mailing Address:: PEYRILHAC
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 87510


Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: REGIS
Middle Name::
Family Name:: CHANTALAT
Name Suffix::
City of Residence:: LIMOGES
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 10, RUE JEAN POUYAT
City of Mailing Address:: LIMOGES



State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 87000

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: BERNARD
Middle Name::
Family Name:: JECKO
Name Suffix::
City of Residence:: RILHAC-RANCON
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 4, RUE JEAN ROSTAND
City of Mailing Address:: RILHAC-RANCON
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 87570

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: LUDOVIC
Middle Name::
Family Name:: LEGER
Name Suffix::
City of Residence:: LIMOGES
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 19, RUE DU CLOS AUGIER



Address::

City of Mailing Address:: LIMOGES

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 87100

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: THIERRY

Middle Name::

Family Name:: MONEDIERE

Name Suffix::

City of Residence:: LIMOGES

State or Province of
Residence::

Country of Residence:: FRANCE

Street of Mailing Address:: 6, RUE EMILE DE GIRARDIN
Address::

City of Mailing Address:: LIMOGES

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 87000

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: PATRICK

Middle Name::

Family Name:: DUMON

Name Suffix::

City of Residence:: VIGOULET-AUZIL

State or Province of
Residence::

Country of Residence:: FRANCE
 Street of Mailing 2, ALLEE DES BOIS
 Address::
 City of Mailing Address:: VIGOLET-AUZIL
 State or Province of Mailing Address::
 Country of Mailing Address:: FRANCE
 Postal or Zip Code of Mailing Address:: 31320

Correspondence Information

Correspondence Customer Number:: 00466

Representative Information

Representative Customer Number::	00466
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/FR2003/003147	10/23/03

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	02/13326	10/24/02	Yes
FRANCE	03/09473	7/31/03	Yes

Filing



Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::

/ N/A